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ABSTRACT

Data relating to population and family planning in ten foreign countries are presented in these situation reports. Countries included are Bulgaria, Czechoslovakia, Denmark, Greece, Honduras, Irish Republic, Malta, Romania, Spain, and the U.S.S.R. Information is provided, where appropriate and available, under two topics, general background and family planning situation. General background covers ethnic groups, language, religion, economy, communication/education, medical/social welfare, and statistics on population, birth and death rates. Family planning situation considers family planning associations and personnel, government attitudes, legislation, family planning services, education/information, sex education, training opportunities for individuals, families, and medical personnel, program plans, government plans, and related supporting organizations. Bibliographic sources are given. (BL)



Situation Report

Distribution

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Country **BULGARIA**

Date **NOVEMBER 1971**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839--2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			110,912 sq.kms.
Total population	7,251,000	7,867,000	8,490,000 (1970 est)
Population growth rate			0.7% (1963-70)
Birth rate	21.7	17.8	16.3 per 1,000 (1970)
Death rate	10.2	8.1	9.1 per 1,000 (1970)
Infant Mortality rate			27.3 per 1,000 (1970)
Women in fertile age group (15-44)			1,893,618 (1965)
Population under 15			24%
Urban population			51.5% (1970)
GNP per capita			US\$860 (1969)
GNP per capita growth rate			6.7% (1961-69)
Population per doctor		620 (1963)	550 (1969)
Population per hospital bed			90 (1969)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

The social welfare system includes health insurance, child and maternity allowances and paid maternity leave. Medical treatment is free of charge for all. Education is free and compulsory for ages 7 to 15.

Planned Parenthood Situation

There is no planned parenthood association in Bulgaria. Advice and services are obtainable at hospitals and outpatient clinics.

Government Attitude

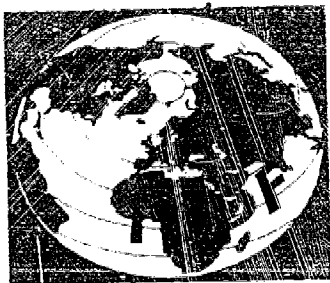
The Government is favourable to the principle of contraception and in January 1969 the Ministry of Public Health published an order underlining the importance of contraception in combating abortion.

Legislation

A liberal abortion law was enacted in 1956. However, alarm at the falling birth rate led to the enactment of a law on population in January, 1968, increasing family allowances and limiting the possibilities of obtaining abortions.

Training

Planned parenthood courses for physicians are sponsored by the Research Institute of Obstetrics and Gynaecology, Sofia. A number of physicians have taken part in the IPPF Europe Regional training scheme.



Situation Report

Distribution *

Country

CZECHOSLOVAKIA

Date

NOVEMBER 1971

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			127,869 sq.kms.
Total population	12,389,000	13,654,000	14,467,000 (1970est)
Population growth rate			0.5% (1963-70)
Birth rate	22.0	15.9	15.8 per 1,000 (1970)
Death rate	10.9	9.2	11.4 per 1,000 (1970)
Infant Mortality rate			22.1 per 1,000 (1970)
Women in fertile age group (15-44)			3,069,314 (1967)
Population under 15			25%
Urban population			52.1% (1970)
GNP per capita			US\$1,370 (1969)
GNP per capita growth rate			3.9% (1960-69)
Population per doctor			480 (1969)
Population per hospital bed			100 (1969)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

The social welfare system includes health insurance and child and maternity allowances. Medical treatment is free of charge for all. Education is free and compulsory for ages 6-15.

Planned Parenthood Situation

There is no planned parenthood association in Czechoslovakia. Advice and services are obtainable at hospitals and health clinics.

Government Attitude

The government is favourable to the principle of planned parenthood and wishes to substitute contraception for abortion.

Legislation

There is no law against contraception. Abortion is permitted on medico-social indications.

Facts and Figures

All methods of contraception are available and Czechoslovakia manufactures condoms, oral contraceptives, IUDs and spermicides.

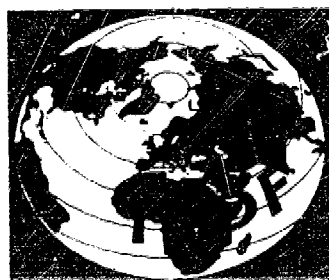
Since 1963, women have been charged a fee for abortion, but pregnancy with IUD in place is a ground for legal abortion free-of-charge.

Training

There is a training course in contraception for midwives in Bratislava. Medical and para medical personnel have taken part in the IPPF Europe Regional training scheme.

Responsible Parenthood and Sex Education

A campaign is underway to dissuade women from seeking abortion as a means to control their fertility and to substitute for it contraception.



Situation Report

Distribution

Country **DENMARK**

Date **DECEMBER 1971**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			43,069 sq.kms.
Total Population		4,581,000	4,921,000(1970 est)
Population Growth rate			0.7%(1963-70)
Birth rate	18.8	16.7	14.4 per 1,000 (1965-70)
Death rate	8.8	9.5	9.8 per 1,000 (1965-70)
Infant Mortality rate	28.9	21.5	14.8 per 1,000 (1965-70)
Women in fertile age group(15-44)			972,002 (1966)
Population under 15			24%
Urban population			80.3% (1970)
GNP per capita			US\$2,310 (1969)
GNP per capita growth rate			2.6% (1960-69)
Population per doctor			690 (1968)
Population per hospital bed			110 (1966-67)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

The economy is well developed. The social welfare system includes health insurance and child and maternity allowances. Education is free and compulsory for ages 7 to 14.

Planned Parenthood Situation

Advice is available through the public health services.

Planned Parenthood Association

Foreningen for Familieplanlaegning (FF).
Aurehojvej 4,
2900 Hellerup,
Copenhagen.

President: Dr. Agnete Braestrup (IPPF Past President)

Association History

The Association was founded in 1956, and became a full member of the IPPF in the same year.

Government Attitude

The Government fully supports planned parenthood and sex education, and works in close co-operation with the Association. The Association co-operates with the Ministries of Interior (Health), Education, Justice, Social Affairs, Greenland and Foreign Affairs as well as the municipality of Copenhagen.

The Danish International Development Authority (DANIDA) has established a health committee which also covers planned parenthood. In 1971 DANIDA granted £80,000 to the IPPF. Denmark also contributes to the UN Fund for Population Activities (UNFPA).

Legislation

Under the terms of the Pregnancy Hygiene Act of 1966, anybody over the age of 15 may be given contraceptive advice by a physician or clinic. Physicians are obliged to offer contraceptive advice to women after delivery or abortion.

Legislation which came into force in 1971 makes sex education compulsory from the age of 7.

A law allowing abortion on socio-medical indications was passed in 1970. In connection with this law and the Pregnancy Hygiene Act, a grant is available through the Ministry of Interior which enables the recovery of expenses in connection with contraceptive advice.

Facts and Figures

The FF has two clinics in Copenhagen and in February 1971 opened an advisory centre for teenagers. The FF distributes good quality contraceptives through the pharmacies, under the name PLAN. Condoms are tested by the Danish Pharmacy Owners' Testing Laboratory (DAK). An IUD (Antigon), orals, and spermicides are manufactured in Denmark.

A survey, 'The Use of Contraception by Young Mothers in Copenhagen,' by Dr. A. Braestrup (J. Biosec. Sci. (1971) 3, 43-60) indicates that knowledge of contraception is now general in Copenhagen and that the majority of people practise contraception. It is estimated that since the liberalization of the abortion law the number of abortions has increased by about 10%.

Training

The FF trains student and postgraduate midwives, and has given lectures on planned parenthood to students from developing countries.

Responsible Parenthood and Sex Education

The FF has its own educational consultants and is co-operating with the Danish Teachers Association and with principals of primary schools on lectures and demonstrations of teaching material. The FF organizes sex education conferences for teachers, and has produced a sex education glossy, reading lists and other material.



Situation Report

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Distribution

Country **GREECE**

Date **NOVEMBER 1971**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			131,944 sq.kms.
Total Population	7,554,000	8,327,000	8,892,000(1970 est)
Population growth rate			0.7% (1963-70)
Birth rate	19.5	18.9	17.4 per 1,000(1969)
Death rate	7.2	7.3	8.1 per 1,000(1969)
Infant Mortality rate			31.8 per 1,000(1969)
Women in fertile age group (15-44)			2,011,590(1967)
Population under 15			25%
Urban population			48.5%(1970)
GNP per capita			US\$840(1969)
GNP per capita Growth			6.2%(1960-69)
Population per doctor		710(1963)	640(1969)
Population per hospital bed			170(1968)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

Education is free and compulsory for ages 6 to 15. There is a state social insurance scheme for wage earners.

Planned Parenthood Situation

There is no planned parenthood association in Greece. Advice and services are available at two hospitals in Athens.

Government Attitude

The government appears unwilling to adopt any policy planned parenthood although it is concerned at the low birth rate and high abortion rate.

Legislation

There is no law against contraception. Abortion is illegal except on medical indications, or in cases of rape, incest or seduction of a minor (under 16 years of age).

Facts and Figures

Condoms are manufactured. Spermicides and diaphragms are available on a limited scale. IUDs are rarely used, principally in private practice. Orals have been available since 1963, and are often sold without prescription. It is illegal to advertise them as contraceptives.

A survey on the 'Epidemiology of induced abortions' was conducted, 1966/67, by the University Centre of Demographic Research*. Skilled (but illegal) abortion is widely practised by physicians and paramedical personnel, at least 60,000 per annum.

Training

Medical and para medical personnel have participated in the IPPF Europe Regional training scheme.

*See 'Social Demography and Medical Responsibility - Proceedings of 6th IPPF Europe & Near East Regional Conference, Budapest, 15-17 September 1969.



Situation Report

Distribution*

Country HONDURAS

Date DECEMBER 1971

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			112,088 sq.kms. ¹
Total population	1,368,605 ¹	1,885,000 (1961)	2,583,000 (1970)
Population growth rate			3.4% (1970)
Birth rate	40.4 ¹	51 (1961)	49 per 1,000 (1970)
Death rate	12.0 ¹	19 (1961)	17 per 1,000 (1970)
Infant mortality rate	85.6 ¹	52	44 per 1,000 (1967)
Women in fertile age group (15-49yrs)			584,000 (1970) ²
Population under 15		48% (1961)	47% (1970)
Urban population		21.7% ³	26.2% (1970) ³
GNP per capita			US\$260 (1969) ⁴
GNP per capita growth rate			1.1% (1960-69) ⁴
Population per doctor			4,800 (1967) ⁵
Population per hospital bed			560 (1967) ⁵

Note: Unless stated otherwise, the source for this table is Datos Básicos de Población en América Latina, 1970: Department of Social Affairs, General Secretariat of the Organization of American States.

1. United Nations Demographic Yearbook
2. Estimate from basic data of CELADE, Boletín Demográfico, Year 2, No. 4, Santiago de Chile, July 1969, Table II.
3. United Nations Monthly Bulletin of Statistics, November 1971.
4. World Bank Atlas, published by the International Bank for Reconstruction and Development, 1971.
5. Fourth Report on the World Health Situation, 1965-1968. Official Records of the WHO, No.193, WHO, June 1971.

I. GENERAL BACKGROUND

Honduras is a predominantly rural country with a low density of population: 23 persons per square kilometre in 1970. This low population density in comparison to its neighbour, El Salvador, has encouraged Salvadorean immigration. Friction between the two countries over the immigrants led to an undeclared war in the summer of 1969. Control of settlers, estimated at about 300,000, is a matter requiring regulation in order to prevent further incidents.

Birth, death, and infant mortality rates in Honduras are probably even higher than the official rates as a result of an incomplete vital registration system. Recent measures to improve health have helped to lower the infant mortality rate slightly. At its present rate of growth of 3.4% per annum, the population will double within 21 years.

The largest city is the capital Tegucigalpa, with about 210,000 inhabitants (1969). The only other large town is the port of San Pedro Sula which as a result of the banana trade is one of the fastest growing towns in Central America.

Ethnic

1945: mixed - 86%, Amerindian - 10%, Negro - 2%, White - 2%.

Language

Spanish is the official language and is almost universally spoken. The strong Indian element survives in the several Indian languages which are still spoken, including Lenca in the south, and Jicaque and Paya in the north-east.

Religion

The majority of the population are Roman Catholic.

Economy

Traditionally the economy has been dominated by banana production, mainly under the control of USA capital. Bananas are still the chief export although in an attempt at diversification, timber production has increased considerably. There is very little industry and agriculture continues to employ the majority of the population. Other products include tobacco, coffee, cotton, coconuts, beans, maize and sugar.

Communications/Education

The transportation system is poor. Roads and railways are concentrated in the north of Honduras to serve the banana plantations and the ports. Air services are an important link.

There are 12 daily newspapers in Tegucigalpa and other towns and 26 other periodicals. The 59 radio stations include some owned by the Government as well as religious and commercial stations. In 1969, there were 145,000 radio sets. There is one television station and 21,500 television sets (1969).

Education is free and compulsory from the ages of seven to 15 years. However school attendance is frequently limited by lack of schools and staff. The 1961 Census data showed that 55% of persons aged 15

years and over were illiterate. There is a National University in Tegucigalpa.

Medical/Social Welfare

The Ministry of Public Health and Social Assistance is responsible for the provision of public health and medical services. There have been improvements in the health services over the 1960s and by 1968 68% of the population were reached compared with 56.6% in 1965, yet many areas, in particular the rural, remain poorly served. Major public health problems in the form of the high incidence of communicable diseases and serious deficiencies in environmental hygiene still persist.

The public services include a small maternal and child health service. In 1968 only 20,340 deliveries out of a total of 107,302 live births took place in a hospital.

The state social security system which operates in the capital is to be extended soon to other districts. Sickness, unemployment, accident, and maternity benefits are provided.

II. FAMILY PLANNING SITUATION

The Government's National Programme for Family Planning provides some family planning services through the official Maternal and Child Health Programme. A private family planning association supported by the IPPF also provides services. But as a result of poor transportation and inadequate health facilities, a large sector of the population is not reached by family planning.

Attitudes

Even before the Government set up its official programme in 1966 it had encouraged the private activities of the Association. The Ministers of Health of the different governments in office gave considerable moral support to family planning. Support also came from the Congress and the medical profession.

Over the past two years, opposition to family planning has grown, following the war with El Salvador and the concern for a larger population for the Army and national defense. There is opposition from both the right and the left, including radical student groups. The influential Roman Catholic Church has also opposed family planning.

Legislation

By a Decree of 25th June 1964 abortion may be carried out if it is necessary for therapeutic reasons. The written consent of the patient, husband or nearest relative is necessary for the operation to be carried out, and the necessity for an abortion has to be approved in writing by a medical committee. Abortion is not to be carried out unless all the methods for preserving the mother's life without prejudicing the life of the foetus, have been tried without success.

Sterilization may be carried out with the patient's written consent and on the decision of three doctors.

The Government allows the tax-free importation of contraceptives.

FAMILY PLANNING ASSOCIATIONHistory

With encouragement from the IPPF Western Hemisphere Region Office, the Honduran Family Planning Association was established in 1961 by the Dean of the Medical School, Dr. Adán Cuevas. The first family planning clinic was opened in 1963. From its initiation, the Association was supported by members of the medical profession, in particular by the Medical School and by the Honduran Gynaecological and Obstetrics Association. The aim of reducing the high abortion rate was one of the chief motives behind the Association's creation. In 1962 an estimated 25% of pregnancies ended in abortion and 60 out of 100 patients admitted to the gynaecological service of the San Felipe Hospital in Tegucigalpa were abortion cases.

The Association operates one pilot clinic, and, until the end of 1971, two hospital post-partum programmes with the assistance of the Population Council.

In 1965, the Association became the first IPPF member in Latin America.

Address:

Asociación Hondureña de Planificación de Familia,
4a Calle No. 1418,
La Plazuela,
Apartado Postal No. 625,
Tegucigalpa, D.C.,
Honduras.

Personnel

President: Dra. Martha Raudales de Midence.
Executive Director: Sr. Alejandro Flores Aguilar.
Director and Head of Pilot Clinic:
Dr. Joaquín A. Núñez.
Education: T.S. Lesbia Elvir Ponce.
Information: Sr. José Leonardo Galindo C.

Services

The Association opened its pilot clinic in the San Felipe General Hospital, Tegucigalpa, in 1963, and in January 1970 transferred it to the capital's Maternal and Child Hospital. In 1969 two post-partum programmes were initiated with the assistance of the Population Council, one in the Maternal and Child Hospital and the other in the Leonardo Martínez Hospital in San Pedro Sula. These programmes, which terminated in December 1971, were part of the Population Council's International Post-partum Programme. The Association does not plan to extend its clinic as the provision of all clinic services is eventually to be the responsibility of the Ministry of Public Health.

In 1970, the pilot clinic served 704 new acceptors and 13,389 follow-up visits, as well as 1,245 home follow-up visits. Of the new acceptors 75.85% used the oral contraceptive. In the post-partum programme the two hospitals served a total of 8,160 new acceptors and 7,942 follow-up visits, as well as 1,265 home follow-up visits. The oral contraceptive was again the most frequently used method. The IUD, the injectable method, and spermicides, are also available in the Association's programmes. Infertility advice is given on request. The Association does not have a cancer detection programme but refers clients to the Cancer Detection Service in the San Felipe General Hospital.

In 1971 the average monthly number of clients served was as follows:

- | | | |
|--------------------------|-------------------|-------|
| - Pilot Clinic : | new acceptors, | 145 |
| | follow-up visits | 1,052 |
| | | |
| - Post-partum programme: | new acceptors, | 581 |
| | follow-up visits, | 963 |

With the termination of the post-partum programme, it is planned to transfer part of the client load to the Association's clinic. The Association is holding discussions with the Honduran Social Security Institute with the aim of gaining the Institute's co-operation in the introduction of family planning services into its clinics in Tegucigalpa.

Education/Information

The Association devotes a large part of its resources to information and education work, using all the mass media available as well as person to person contact. The programme seeks to reach both the general public and specific groups who are influential within the community, not only in the urban but in the rural areas. In 1971 and 1972 the emphasis is being put on reaching the rural population who represent 73.8% of the total (1970). The Association's mobile audio-visual unit, donated by CARE* in 1970, plays a major part in motivation amongst this important sector of the community.

The Association's programme in 1970 and 1971 included seminars, courses, talks, home-visits and filmshows, for clinic acceptors, community groups, agricultural and labour leaders, teachers, parents, and medical personnel. The mass media were used extensively: in 1970, over 6,200 radio spots were broadcast on 11 stations throughout the country and 120 television spots in four cities. The press was used and three special exhibitions were mounted in 1970, in Tegucigalpa and San Pedro Sula.

The Association prints and distributes a selection of literature which includes its monthly Newsletter, leaflets giving information on contraceptive methods and motivational material. In 1970, 1,000 leaflets on responsible parenthood were distributed in the Mosquito language, spoken by a group of Indians living along the Caribbean coast.

A new project was developed in 1971 in cooperation with the Ministry of Public Education, World Education Inc., and the National Peasant Association of Honduras, to include family planning education as part of an adult literacy campaign in village communities. From May to October 1971, a pilot campaign was organised in 20 villages selected by the Peasant Association, attended by a minimum of 25 pupils in each village. The Family Planning Association which is responsible for the programme's direction and administration, organized the training course for the 20 educators who participated in the project. The programme is to be continued and developed in 1972.

*CARE: Cooperative for American Relief Everywhere, Inc.

Training

Following the initiation of the Government's family planning programme in 1966 the Association became responsible for the training of the medical and paramedical personnel taking part in the official programme. In 1968-69, over 200 persons were trained, including physicians, nurses, medical aides, and social workers. In 1970 and 1971 training activities were not extensive. Short courses were held for nursing students and the nursing staff of hospitals, and a one week course was held in 1971 for physicians from maternal and child health centres. This was held in co-operation with the Ministry of Public Health.

Government

History

The Government's National Programme for Family Planning was established in 1966 with US AID assistance and received an appropriation within the public health budget voted in Congress. Family planning services were to be provided by the Government within its general health services while the private Association was to be responsible for training and for information and education programmes. After the original Government Programme stagnated, a new Maternal and Child Health Programme was created in 1968, which integrated maternal and child health, nutrition, and family planning services. A National Coordinating Committee was set up composed of representatives from the Government and the private Association.

The Government Programme was reorganized in January 1970 to widen the scope of its activities and to reach a larger sector of the women of fertile age. The Ministry of Public Health concentrated on improving the services offered in its clinics, which by October 1970 totalled 18 permanent clinics and three mobile rural units. To stimulate the provision of services in the rural areas, the private Association organized a meeting in April 1970 for 84 staff members of the Government's Rural Mobile Health Programme, to encourage their co-operation in the provision of services.

In 1971, on the basis of a decree, the Maternal and Child Health Programme of the Ministry of Public Health was made responsible for the supervision and co-ordination of all family planning activities.

Up to now the Government Programme has remained small and faces many problems in trying to reach the population at risk, in particular in view of the lack of proper health care in many areas and of the inaccessibility of many parts of the country.

Other Organizations

As part of its educational programme in 1968, the private Association organized talks for the executives and workers of the Standard Fruit Company. The Company has organized a family planning programme among the banana workers.

Other Sources

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- _____, Newsletter.
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Situation Report

Distribution

Country **IRISH REPUBLIC**

Date **NOVEMBER 1971.**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			70,280 sq. kms.
Total Population	2,969,000	2,834,000	2,944,000 (1970 est)
Population growth rate			0.5% (1963-70)
Birth rate	21.4	21.4	21.8 per 1000 (1970)
Death rate	12.6	11.5	11.5 per 1000 (1970)
Infant Mortality rate			19.2 per 1000 (1970)
Women in fertile age group (15-44)			523,932 (1966)
Population under 15			31%
Urban population			46.9% (1970)
GNP per capita			US\$1,110 (1969)
GNP per capita growth rate			3.5% (1960-69)
Population per doctor			960 (1966)
Population per hospital bed			70 (1966)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

The Republic of Ireland comprises 26 of the 32 counties making up the island. The social welfare system includes health insurance, and child and maternity allowances. Education is free and compulsory for ages 6 to 14. Secondary Education is private and largely controlled by religious organizations.

Planned Parenthood Situation

Planned parenthood advice is available from the planned parenthood association.

Legislation

The sale and import for sale of contraceptives is illegal. Oral contraceptives are imported as 'cycle regulators', but condoms are not available. The law against the import of other contraceptives is rigorously enforced. Abortion is not permitted on any grounds.

Planned Parenthood Association

Fertility Guidance Centre,
15 Mountjoy Square,
Dublin.

Chairman: Dr. J. Wilson

Association History

The Fertility Guidance Centre was founded in February 1969 to promote education and research into problems of fertility, and to give practical planned parenthood advice. A second clinic was opened in February 1971.

Facts and Figures

About 5% of married women aged 15-49 take oral contraceptives in the Republic.

The marriage rate is low - only about 50% of women aged 15-49 are married. The mean age at marriage is high, 26 years for women (1965) but decreasing.

Responsible Parenthood and Sex Education

One of the principal aims of the Fertility Guidance Centre is to educate people towards planned parenthood. The press has devoted several items to planned parenthood.

IPPF AID

£3,000 in 1971.



Situation Report

Distribution

Country **MALTA**

Date **NOVEMBER 1971**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			316 sq.kms.
Total Population	312,000	329,000	326,000 (1970 est)
Population growth rate			-0.1% (1963-70)
Birth rate	29.8	26.1	16.3 per 1000 (1970)
Death rate	10.1	8.6	9.4 per 1000 (1970)
Infant Mortality rate			27.9 per 1000 (1970)
Women in fertile age group (15-44)			74,062 (1967)
Population under 15			32%
Urban Population			87.4% (1970)
GNP per capita			US\$710 (1969)
GNP per capita growth rate			4.1% (1960-69)
Population per doctor		780	680 (1965)
Population per hospital bed			90 (1967)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

There is a reciprocity in social welfare schemes between Malta and the U.K. Education is free and compulsory for ages 6 to 14, and is given in Roman Catholic government schools. There is considerable emigration from Malta.

Planned Parenthood Situation

There is no planned parenthood association.

Government Attitude

There is no official government policy towards planned parenthood.

Legislation

The import of contraceptives is illegal, however, oral contraceptives are available.

Training

Contraception is included in the curriculum for medical students and midwives.

Responsible Parenthood and Sex Education

There is some family life education, including instruction in the rhythm method.



Situation Report

Distribution

Country **ROMANIA**

Date **NOVEMBER 1971.**

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			237,500 sq.kms.
Total Population	16,311,000	18,403,000	20,253,000 (1970 est)
Population growth		0.7	1.1% (1963-70)
Birth rate	24.9	19.1	21.1 per 1000 (1970)
Death rate	12.0	8.7	9.6 per 1000 (1970)
Infant Mortality rate			49.5 per 1000 (1970)
Women in fertile age group (15-44)			4,434,081 (1966)
Population under 15			26%
Urban population			41.7% (1970)
GNP per capita			US\$860 (1969)
GNP per capita growth rate			7.5% (1960-69)
Population per doctor		730 (1963)	710 (1968)
Population per hospital bed			120 (1969)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

The social welfare system includes health insurance and child and maternity allowances as well as paid maternity leave. Medical treatment is free of charge. Education is free and compulsory for ages 6 to 15.

Planned Parenthood Situation

There is no planned parenthood association. Advice is available from the Filantropia hospital in Bucharest.

Government Attitude

It is government policy to encourage families to have more children.

Legislation

The law of 1966 restricted the previous liberal legislation on abortion to medical indication, or when the woman has four or more children.

Legislation makes divorce more difficult than it was before 1966. Economic inducements towards larger families are being offered; these include high taxation for childless couples and single people, and priority is being given to the building of nurseries and children's homes.

Training

Physicians have participated in the IPPF Europe Regional training scheme.



Situation Report

Distribution *

Country

SPAIN

Date

NOVEMBER 1971

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			504,750 sq. kms.
Total Population	27,868,000	30,303,000	32,290,000 (1970 est)
Population growth rate			1.0% (1963-70)
Birth rate	20.3	21.8	19.8 per 1000 (1970)
Death rate	11.6	8.8	8.6 per 1000 (1970)
Infant Mortality rate	68.2	43.7	27.8 per 1000 (1970)
Women in fertile age group (15-44)			6,817,483 (1960)
Population under 15			27%
Urban population			60.9% (1970)
GNP per capita			US\$820 (1969)
GNP per capita growth rate			6.5% (1960-69)
Population per doctor		1200 (1963)	770 (1968)
Population per hospital bed		200 (1963)	220 (1968)

*This report is not an official publication but has been prepared for informational and consultative purposes.

GENERAL BACKGROUND

There is a contributors unpaid insurance scheme. Education is free and compulsory for ages 6 to 14.

Planned Parenthood Situation

There is no planned parenthood association. Advice is available in a few hospitals.

Government Attitude

The official attitude towards planned parenthood is negative.

Legislation

Contraception and abortion are prohibited.

Facts and Figures

Oral contraceptives are available on prescription from private physicians as cycle regulators. Condoms are available as preventatives against venereal disease. There is thought to be a high incidence of illegal abortion.

Training

Medical personnel have participated in the IPPF Europe Regional training scheme.



Situation Report

Distribution*

Country

U.S.S.R.

Date

NOVEMBER 1971

International Planned Parenthood Federation, 18/20 Lower Regent Street, London S.W.1

01. 839-2911/6

STATISTICS	1950	1960	LATEST AVAILABLE FIGURES
Area			22,402,200 sq. kms.
Total population	181,050,000	214,238,000	241,748,000 (1970 census)
Population growth rate			1.1% (1963-70)
Birth rate	26.4	24.9	17.5 per 1000 (1970)
Death rate	9.4	7.1	8.2 per 1000 (1970)
Infant Mortality rate			24.4 per 1000 (1970)
Women in fertile age group (20-44)			44,770,000 (1961)
Population under 15			28%
Urban population			57.1% (1970)
GNP per capita			US\$1,200 (1969)
GNP per capita growth rate			5.6% (1960-69)
Population per doctor		588 (1964)	380 (1968)
Population per hospital bed			107 (1969)

*This report is not an official publication but has been prepared for informational and consultative purposes.

I. GENERAL BACKGROUND

The Soviet Union is made up of 15 Union Republics. The social welfare system includes health insurance, child and maternity allowances, as well as paid maternity leave. Medical treatment is free of charge. Education is free and compulsory for eight years.

Planned Parenthood Situation

There is no planned parenthood association. Advice is theoretically available within the public health service, at local health centres and obstetrics and gynaecology departments of hospitals.

Government Attitude

Official attitudes are believed to be influenced by present demographic trends in the Soviet Union. Reports indicate a growing concern by demographers and economists over declining birth rates. The birth rate for the country of 17.2 conceals widespread differences between various parts of the country. Whereas birth rates in Central Asia and Caucasia are high, they are exceptionally low in European Russia. Progress in contraception has been influenced by the fact that abortion has been available on demand since the early 1920's with the exception of the period 1936/1955. The government's attitude to abortion is on three levels. Firstly, it is considered that women have the right to abortion if they so wish. Secondly, the government tries to remove the incentive to abortion, by improving social and economic conditions, such as better housing and more nursery schools. Thirdly, there is a general agreement that contraception is a preferable alternative. So far it is not considered that any contraceptive fulfills all the necessary requirements. Strictly controlled trials of orals and IUDs are being conducted by medical institutes and hospitals.

Since 1966, when the UN agencies, and in particular the WHO, began to emphasise the health aspects of planned parenthood, the Soviet Union has voted for resolutions that include either directly, or by inference, aid to 'developing' countries in health and welfare programmes, provided the request comes first from the government concerned.

Legislation

1956 legislation made abortion available upon request up to 12 weeks gestation.

Facts and Figures

Reports on the extent of contraceptive practice in the Soviet Union vary widely. There are no figures available, but the general impression from various sources is that in practice only barrier methods are used to any extent. It is estimated that there are 1 to 2 legal abortions per live birth.

Training

The extent of planned parenthood training is not known. However, it is reported that it is included in the curricula of physicians and midwives as a matter of routine.

Responsible Parenthood and Sex Education

Theoretically this is carried out in hospitals and post-natal clinics. Again the actual extent of this is not known. Many periodicals carry papers and articles on various aspects of planned parenthood describing methods of contraception, clinical trials and other activities. Two booklets have been produced by the Ministry of Health, on abortion and methods of contraception.